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Passed Assistant Surgeon Goldberger reported his arrival at Morgan City, La., July 30. He stated that the health officer denied the existence of anything suspicious. A case observed at Lake Charles appeared to justify another visit, and he proposed returning to that place on the following day.

Dr. J. A. Albright, secretary Tennessee State Board of Health, reported, July 31, that he had completed the system of train inspection for all trains from the South via Memphis to Fulton, Ky., and that the organization from Holly Springs to Fulton and from Corinth to Cairo would be completed August 1. A telegram was received, July 31, from Dr. J. A. Albright, saying that the Tennessee State Board of Health has declared quarantine for protection of all territory in West Tennessee, including Memphis, as well as Hamilton County and Chattanooga in East Tennessee. An inquiry was made as to the earliest possible date the Bureau can lend aid to Tennessee by extending the train-inspection service so as to cover the territory indicated.

From Morgan City, La., Passed Assistant Surgeon Goldberger reported, July 31, a case of yellow fever. The case was traced from Hot Springs, Ark., July 25, via Memphis and Vicksburg, July 25-26; then by way of Burnside and Donaldsonville, Miss., and Thibodaux and Shreveport, La., arriving at Morgan City July 26, and taken sick July 28. Doctor Goldberger was ordered, August 1, to proceed without delay to Hot Springs to investigate as to presence of *Stegomyia* there and to ascertain if the case which developed at Morgan City had come to Hot Springs from New Orleans. Doctor Goldberger reported on the same date that no connection between the Morgan City case and New Orleans had been traced, and referred for further investigation of the case to the route previously indicated.

Acting Assistant Surgeon Gray, at Shreveport, La., reported, August 1, a case of yellow fever in detention camp outside of the city limits. The case was well screened and all precautions were taken.

## SUMMARY OF SANITARY REPORTS.

### *Status and progress of epidemics.*

*Asiatic cholera.*—The cholera reports for the week are limited to a few cases in India. At Calcutta 8 sporadic fatal cases of cholera, all Hindoos except one, a Mohammedan, occurred during the week ending June 17. The board of health states that there was no connection with the shipping or the port.

The Turkish Empire, according to the British delegate on the Ottoman board of health, continues to be free from cholera. It is less certain, says the same authority, whether Persia is equally so. The latest reports indicate that, notwithstanding assurances to the contrary

from interested sources, cholera is still present in Meshed and other places in the Khorassan province. The cases reported in May at Teheran are now said to have been sporadic. June 5 it was reported that some cases of choleric form diarrhea had been observed at Hamadan.

The facts regarding rumored cholera on the British steamship *Decido* in the Mediterranean are of interest. The vessel left Sutherland, Scotland, May 22, and arrived at Antwerp, Belgium, June 3, where a medical visit was made but no sickness discovered. At Alexandria, Egypt, June 26, the vessel was placed under surveillance because one of the cooks aboard manifested symptoms of cholera. The sick man was taken ashore and disinfection was practiced. The steamship left Alexandria June 27, in quarantine for Constantinople, with a bill of health indorsed as follows: "A suspected case of cholera was found June 26 aboard this vessel in the person of a cook. The case is under observation." The result of the investigation, given out after the departure of the vessel, was declared to be negative. The sanitary authorities at Constantinople were advised by telegraph of the result of the bacteriological inquiry.

*Yellow fever*.—From the date of the appearance of the first case of yellow fever at New Orleans, July 21, there have been to August 3, 308 cases and 59 deaths.

Single cases have also been reported during the past few days at Morgan City and Shreveport (isolation camp), La., and at Lumberton and Sumrall, Miss., as well as several cases at the Gulf Quarantine, Ship Island.

Certain points in relation to the railroads entering New Orleans are of interest in connection with the prevalence of yellow fever in that city and the location of isolation camps. In addition to local lines six great railroads have their termini in New Orleans. The Louisville and Nashville enters from the northeast. The Southern Pacific and the Texas and Pacific, coming from the west, run parallel to each other on the bank of the Mississippi and have their termini in Algiers, on the opposite side of the river from New Orleans, along which side of the river the tracks run. The Illinois Central approaches the city from the west, its tracks running across Jefferson County alongside of the tracks of the Yazoo and Mississippi Railroad. Both the Queen and Crescent and the Southern enter New Orleans over the tracks of another line.

The Southern reaches New Orleans on the line of the New Orleans and Northeastern. Slidell, one of the four detention camps with which New Orleans is encircled, is across Lake Pontchartrain, northeast of New Orleans, on the line of the latter railroad, which, before reaching the city, crosses the eastern extension of the lake. It was at first designed to establish a second isolation camp at Kenner, west of New

Orleans, on the confines of Jefferson and St. Charles counties, at the point where the tracks of the Illinois Central and of the Yazoo and Mississippi diverge from each other, but Hanrahan, also on the Illinois Central, was ultimately fixed upon. A third isolation camp is at Avondale, a station of the Texas Pacific, southwest of New Orleans, where the Texas Pacific and the Southern Pacific tracks run side by side. Waveland, the site selected for the fourth camp, is east of New Orleans on the Louisville and Nashville Railroad. To these four camps has been sent the material held for such an emergency in reserve at Fontainebleau, Miss., on the Louisville and Nashville Railroad.

One case of yellow fever was reported at Tampa, Fla., July 28. The patient, an Italian, left New Orleans July 22 by rail and reached Tampa two days later. The attack was mild and the patient recovered speedily. Inasmuch as the patient arrived at Tampa after his infective period, it is deemed probable that the mosquitoes at Tampa were not infected by the case, and the appearance at Tampa of other cases from this source is not apprehended.

In North America outside the United States, according to notifications received during the month of July, yellow fever has been reported in Tehuantepec, Veracruz, Coatzacoalcas, and Tierra Blanca, Mexico; Puerto Cortez, San Pedro, and Choloma, Honduras; Belize, British Honduras; Livingston, Guatemala; and Panama, Colon, La Boca, Corozal, Empire, and Paraiso, Republic of Panama. San Pedro, Honduras, is the only one of these places in which an extensive prevalence is recorded. In the Canal Zone there were 5 cases with 1 death at Colon between July 2 and July 8, and 11 cases with 7 deaths at Panama from June 29 to July 15. The number of cases from week to week have been previously noted in this summary. In South America reports received since July 1 show the continued presence of disease in Maracaibo, Venezuela; Guayaquil, Ecuador; and Rio Janeiro, the latest reports indicating 85 cases with 11 deaths between May 27 and June 11 at Rio Janeiro.

July reports from outside the Western Hemisphere do not indicate the presence of yellow fever elsewhere than in Senegal, Africa (1 death May 31 at Goree-Dakar), and Santa Cruz de Teneriffe (1 case the latter part of June in quarantine aboard a steamship from Colon and way ports).

*Bubonic plague.*—In Egypt the latest reports indicate plague in 4 provinces outside of Alexandria and Port Said. In Alexandria there were 8 cases, with 6 deaths, between June 22 and 29. Some of the cases were attended to in hospital, others were found dead in their houses. One simple bubonic case was an agent of police. At Port Said there was 1 death from plague outside the hospital June 25. At Damanhoor, capital of the Behera prefecture, at a railroad junction 38

miles from Alexandria, there were 9 cases of plague, with 7 deaths, between June 23 and 28. In the provinces of Menoofeeyeh, Ghar-beeyeh, and Galyoobeeyeh there have recently been a few cases. In all Egypt there were 103 cases of plague reported from the beginning of the calendar year to June 24. During the corresponding period last year there were 647 cases.

The American consul-general at Barcelona, Spain, under date of July 12, says that the newspaper reports of cases of bubonic plague at that port have been officially declared false. The mayor and other local authorities deny that any such malady exists there.

According to information received July 24 through the State Department, the quarantine against ports of the Republic of Panama by the Costa Rican Government has been removed.

It now appears that plague-infected rats were found at Hamburg May 26 and 27, aboard the British steamship *Hylas*, from which, on her arrival at Middlesborough, England, the patient who died of plague at Manchester June 12 disembarked and went home by rail. The rats, two in number, were found in the process of discharging the cargo, which came from Buenos Ayres. The rats were examined at the Institute of Hygiene. The steamship arrived at Hamburg May 23 with "all well." The disease did not develop in the man who died at Manchester until the day after he left the ship at Middlesborough. In addition to the plague rats, about 200 other rats were caught on the ship at Hamburg. No live rats were found aboard after the cargo had been completely discharged. The whole interior of the vessel was cleaned and disinfected prior to her departure for England.

The master of the vessel stated on arrival in the river Lees that there had been no sickness or complaint of feeling ill since the vessel left Germany. Nevertheless the port medical officer informed himself of the destination of all persons from the vessel and sent advices to the authorities of the localities to which they proceeded. Thus all were kept under observation and the Manchester case was detected. Owing to the circumstances stated, there is good ground to hope that no further cases will develop at Manchester, the chief English market for the cotton trade, located in the most populous district, where about 700 industries are carried on, among which the manufacture of woolen, silk, and machinery lead.

*Quarantine regulations.*—By a circular dated May 24, 1905, the importation of rags, used clothing, soiled linen, bedding, blankets, mattresses, and like effects from Turkey, Montenegro, Servia, and Bessarabia is prohibited. Vessels arriving at Austrian ports with such articles aboard are sent to a lazaretto in order to be cleansed and disinfected, prior to being admitted to free pratique. All vessels proceeding from ports on the Danube, from Turkey, and from Russian ports on the Black Sea, are subject to medical inspection at Austrian ports.

The maritime authorities at Trieste, Austria, have issued a circular, dated June 29, repealing the preceding circular of November 25, 1904.

A decision dated June 19, of the Turkish sanitary board, repeals the plague regulations against arrivals from Aden. Vessels, however, proceeding from Aden are still subject to inspection at Turkish ports. A Turkish ordinance, dated June 24, orders 48 hours' quarantine with appropriate measures of disinfection and rat destruction against arrivals from Alexandria, Egypt.

Plague quarantine regulations have been put in force in Austria, under date of June 27, against arrivals from the Straits Settlements.

#### GENERAL SANITARY INFORMATION.

*Study of sanitation and tropical diseases in India.*—A scheme has been approved by the government of India for the provision of more adequate means for the scientific study of the diseases peculiar to that country. When the new plan is developed it will probably no longer be necessary for officers to go from India to Europe to study the bacteriology and parasitology of tropical diseases, and it is expected that workers from other countries will seek Indian laboratories to avail themselves of the unrivaled material for study which the diseases of India afford. It is contemplated establishing a central research institute at Kasauli and a laboratory for scientific medical and sanitary work at the headquarters of each provincial government.

The functions of the central laboratory will be original research, the preparation of curative sera for the diseases of man, and the training of scientific workers. The functions of the provincial laboratories will be primarily the provision of expert assistance for the provincial, medical, and sanitary officers, but the superintendents of these laboratories will be encouraged, as far as opportunities go, to prosecute original research. Most of the provincial laboratories are already in existence, though some of them are at present undertaking work which will be carried on elsewhere when the general scheme is mature.

*Fumigation in tuberculosis.*—The Kansas State board of health, according to its bulletin for July, has ordered that hereafter county health officers require the fumigation of every house in which there has been a death from tuberculosis in the same manner as in event of smallpox. The opinion is expressed that there can be no doubt that a second or third case of phthisis in the same family has often occurred from neglect of this precaution.